



## ecology and environment, inc.

223 WEST JACKSON BLVD., CHICAGO, ILLINOIS 60606, TEL. 312-663-9415

International Specialists in the Environmental Sciences

DATE: August 7, 1980  
TO: Rene Van Someren  
FROM: Max D. Michael  
SUBJECT: Illinois/Eckhart Report  
Granite City/Air Products

A Preliminary Assessment form (USEPA Form T2070-2) has been completed for the subject site. This site was listed on the Illinois-Eckhart Report and has been researched pursuant to TDD# F5-8005-3.

In reviewing the Preliminary Assessment form and general background information it was determined that the wastes stored by Air Products and Chemical of Granite City, Illinois were not special/hazardous wastes. Therefore it is recommended that no further action be taken.

MM/df

EPA Region 5 Records Ctr.



283312



POTENTIAL HAZARDOUS WASTE SITE  
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION

V

SITE NUMBER (to be assigned by HQ)

**NOTE:** This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

**GENERAL INSTRUCTIONS:** Complete Sections I and III through X as completely as possible before Section II (*Preliminary Assessment*). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

## I. SITE IDENTIFICATION

## A. SITE NAME

Air Products and Chemical

## B. STREET (or other identifier)

2204 Monroe Ave.

## C. CITY

Granite City

## D. STATE

IL

## E. ZIP CODE

## F. COUNTY NAME

Madison

## G. OWNER/OPERATOR (if known)

1. NAME Air Products and Chemical

## 2. TELEPHONE NUMBER

## H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE ☐ 6. UNKNOWN

## I. SITE DESCRIPTION

T.S.N-R.9W Sec.19

## J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)

Eckhart Report

## K. DATE IDENTIFIED

(mo., day, &amp; yr.)

## L. PRINCIPAL STATE CONTACT

## 1. NAME

Z IL EPA

## 2. TELEPHONE NUMBER

## II. PRELIMINARY ASSESSMENT (complete this section last)

## A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☒ 4. NONE ☐ 5. UNKNOWN

## B. RECOMMENDATION

☒ 1. NO ACTION NEEDED (no hazard)☐ 2. IMMEDIATE SITE INSPECTION NEEDED

a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

☐ 3. SITE INSPECTION NEEDED

a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (low priority)

## C. PREPARER INFORMATION

## 1. NAME

Max D. Michael

## 2. TELEPHONE NUMBER

312-663-9415

## 3. DATE (mo., day, &amp; yr.)

6-24-80

## III. SITE INFORMATION

## A. SITE STATUS

☒ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)☐ 2. INACTIVE (Those sites which no longer receive wastes.)☐ 3. OTHER (specify):  
(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

## B. IS GENERATOR ON SITE?

☐ 1. NO☒ 2. YES (specify generator's four-digit SIC Code):

## C. AREA OF SITE (in acres)

4.5

## D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg.,-min.,-sec.)

2. LONGITUDE (deg.,-min.,-sec.)

## E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO☒ 2. YES (specify):

## IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

<input checked="" type="checkbox"/> A. TRANSPORTER	<input checked="" type="checkbox"/> B. STORER	<input checked="" type="checkbox"/> C. TREATER	<input checked="" type="checkbox"/> D. DISPOSER
1. RAIL	1. PILE	1. FILTRATION	1. LANDFILL
2. SHIP	2. SURFACE IMPOUNDMENT	2. INCINERATION	2. LANDFARM
3. BARGE	3. DRUMS	3. VOLUME REDUCTION	3. OPEN DUMP
4. TRUCK	4. TANK, ABOVE GROUND	4. RECYCLING/RECOVERY	4. SURFACE IMPOUNDMENT
5. PIPELINE	5. TANK, BELOW GROUND	5. CHEM./PHYS. TREATMENT	5. MIDNIGHT DUMPING
6. OTHER (specify):	<input checked="" type="checkbox"/> 6. OTHER (specify): Unknown but small amounts	6. BIOLOGICAL TREATMENT	6. INCINERATION
		7. WASTE OIL REPROCESSING	7. UNDERGROUND INJECTION
		8. SOLVENT RECOVERY	8. OTHER (specify):
		9. OTHER (specify):	

## E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

- General refuse is hauled to permitted landfill.
- Hydrated lime (not a special waste) is sold to Fox Industries of St. Louis.
- Waste Oil Recycled through Gateway Petroleum Co., East St. Louis.

## V. WASTE RELATED INFORMATION

## A. WASTE TYPE

- ☐ 1. UNKNOWN    ☐ 2. LIQUID    ☒ 3. SOLID    ☐ 4. SLUDGE    ☐ 5. GAS

## B. WASTE CHARACTERISTICS

- ☐ 1. UNKNOWN    ☐ 2. CORROSIVE    ☐ 3. IGNITABLE    ☐ 4. RADIOACTIVE    ☐ 5. HIGHLY VOLATILE  
☐ 6 TOXIC    ☐ 7 REACTIVE    ☐ 8. INERT    ☐ 9. FLAMMABLE

- ☒ 10. OTHER (specify): Not a special waste

## C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

*Records not currently on file.*

*To obtain records requires further investigation.*

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
<input checked="" type="checkbox"/> (1) PAINT, PIGMENTS	<input checked="" type="checkbox"/> (1) OILY WASTES	<input checked="" type="checkbox"/> (1) HALOGENATED SOLVENTS	<input checked="" type="checkbox"/> (1) ACIDS	<input checked="" type="checkbox"/> (1) FLYASH	<input checked="" type="checkbox"/> (1) LABORATORY PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify):		

## V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

*MATERIAL ON SITE NOT A SPECIAL WASTE*  
*APPARENTLY NO HAZARD*

COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

## VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
1. HEALTH				
2. FIRE				
3. CORRUPTION				
4. CONTAMINATION				
5. CONTAMINATION OF AIR				
6. CONTAMINATION OF WATER				
7. CONTAMINATION OF SOIL				
8. CONTAMINATION OF FOOD CHAIN				
9. CONTAMINATION OF WATER				
10. CONTAMINATION OF AIR				
11. NOTICEABLE ODORS				
12. CONTAMINATION OF SOIL				
13. PROPERTY DAMAGE				
14. FIRE OR EXPLOSION				
15. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
16. SEWER, STORM DRAIN PROBLEMS				
17. EROSION PROBLEMS				
18. INADEQUATE SECURITY				
19. INCOMPATIBLE WASTES				
20. MIDNIGHT DUMPING				
22. OTHER (specify):				Apparently not a hazardous waste site.

## VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1. NPDES PERMIT    ☐ 2. SPCC PLAN    ☐ 3. STATE PERMIT (specify): \_\_\_\_\_  
☐ 4. AIR PERMITS    ☐ 5. LOCAL PERMIT    ☐ 6. RCRA TRANSPORTER  
☐ 7. RCRA STORER    ☐ 8. RCRA TREATER    ☐ 9. RCRA DISPOSER  
☐ 10. OTHER (specify): Unknown

B. IN COMPLIANCE?

- ☐ 1. YES    ☐ 2. NO    ☒ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name &amp; number): \_\_\_\_\_

## VIII. PAST REGULATORY ACTIONS

- ☒ A. NONE    ☐ B. YES (summarize below)

## IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE    ☒ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
Meeting-Inspection		State	Information concerning Eckhart report

## X. REMEDIAL ACTIVITY (past or on-going)

- ☒ A. NONE    ☐ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

## IV. REMEDIAL ACTIONS

**A. SHORT TERM/EMERGENCY ACTIONS (On Site and Off-Site):** List all emergency actions taken or planned to bring the site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo, day, & yr)	3. ACTION END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION: INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

**B. LONG TERM STRATEGY (On Site and Off-Site):** List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo, day, & yr)	3. ACTION END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION: INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

## C. MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL MAN- HOURS FOR REMEDIAL ACTIVITIES	3. TOTAL COST FOR REMEDIAL ACTIVITIES
a. EPA		\$
b. STATE		\$
c. PRIVATE PARTIES		\$
d. OTHER (specify):		\$



POTENTIAL HAZARDOUS WASTE SITE  
FINAL STRATEGY DETERMINATION

REGION SITE NUMBER

IV

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME <i>Air Products &amp; Chemicals</i>	B. STREET <i>2204 Monroal ave</i>	
C. CITY <i>Granite City</i>	D. STATE <i>Ill</i>	E. ZIP CODE

II. FINAL DETERMINATION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED	<input checked="" type="checkbox"/>				
B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE (If yes, complete Section III.)	<input type="checkbox"/>				
C. REMEDIAL ACTION (If yes, complete Section IV.)	<input type="checkbox"/>				
D. ENFORCEMENT ACTION (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)	<input type="checkbox"/>				

E. RATIONALE FOR FINAL STRATEGY DETERMINATION

*no hazardous waste at site*

F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.)

G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME <i>Paul Dimock</i>	2. TELEPHONE NUMBER <i>856-6710</i>	3. DATE (mo., day, & yr.) <i>3-5-81</i>
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III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE

List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.

A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
D. TOTAL ESTIMATED COST	\$	



## POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION

REGION 5 SITE NUMBER HL-000010038

NOTE: The initial identification of a potential site or incident should not be interpreted as a finding of illegal activity or confirmation that an actual health or environmental threat exists. All identified sites will be assessed under the EPA's Hazardous Waste Site Enforcement and Response System to determine if a hazardous waste problem actually exists.

A. SITE NAME Granite City Illinois Facility		B. STREET (or other identifier) 2200 Monroe St.	
C. CITY Granite City	D. STATE Illinois	E. ZIP CODE 62040	F. COUNTY NAME
G. OWNER/OPERATOR (if known) 1. NAME		2. TELEPHONE NUMBER	
H. TYPE OF OWNERSHIP (if known) <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			
I. SITE DESCRIPTION			
J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)		K. DATE IDENTIFIED (mo., day, & yr.)	
L. SUMMARY OF POTENTIAL OR KNOWN PROBLEM			
M. PREPARER INFORMATION			
1. NAME		2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)





POTENTIAL HAZARDOUS WASTE SITE  
FINAL STRATEGY DETERMINATION

REGION SITE NUMBER

V

160000/0056

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME

Granite City Illinois Facility

B. STREET

C. CITY

Granite City

D. STATE

IL

E. ZIP CODE

II. FINAL DETERMINATION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION

MARK 'X'

ACTION AGENCY

EPA

STATE

LOCAL

PRIVATE

A. NO ACTION NEEDED

B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE  
(If yes, complete Section III.)

C. REMEDIAL ACTION (If yes, complete Section IV.)

D. ENFORCEMENT ACTION (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)

E. RATIONALE FOR FINAL STRATEGY DETERMINATION

This site is The same as Granite City Acetylene Plant in Granite City.

F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.).

G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.).

H. PREPARER INFORMATION

1. NAME

Duggan W. Wilson

2. TELEPHONE NUMBER

3. DATE (mo., day, & yr.)

9/12/80

III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE

List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.

A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
D. TOTAL ESTIMATED COST	\$	

## IV. REMEDIAL ACTIONS

**A. SHORT TERM/EMERGENCY ACTIONS (On Site and Off-Site):** List all emergency actions taken or planned to bring the site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo, day, & yr)	3. ACTION END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

**B. LONG TERM STRATEGY (On Site and Off-Site):** List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo, day, & yr)	3. ACTION END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

## C. MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL MAN- HOURS FOR REMEDIAL ACTIVITIES	3. TOTAL COST FOR REMEDIAL ACTIVITIES
a. EPA		\$
b. STATE		\$
c. PRIVATE PARTIES		\$
d. OTHER (specify):		\$



POTENTIAL HAZARDOUS WASTE SITE  
FINAL STRATEGY DETERMINATION

REGION SITE NUMBER

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency, Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME

Granite City Acetylene

B. STREET

C. CITY

Granite City

D. STATE

ILL

E. ZIP CODE

II. FINAL DETERMINATION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED		X			
B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE (If yes, complete Section III.)					
C. REMEDIAL ACTION (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR FINAL STRATEGY DETERMINATION

Duplicate site. See Air Products

F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.)

G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME

S. Logan

2. TELEPHONE NUMBER

886-6714

3. DATE (mo., day, & yr.)

10/8/86

III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE

List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.

A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
D. TOTAL ESTIMATED COST	\$	

## IV. REMEDIAL ACTIONS

A. SHORT TERM EMERGENCY ACTIONS (On Site and Off-Site): List all emergency actions taken or planned to bring the site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo, day, & yr)	3. ACTION END DATE (mo, day, & yr)	4. ACTION AGENCY (I PA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

B. LONG TERM STRATEGY (On Site and Off-Site): List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo, day, & yr)	3. ACTION END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

## C. MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL MAN- HOURS FOR REMEDIAL ACTIVITIES	3. TOTAL COST FOR REMEDIAL ACTIVITIES
a. EPA		\$
b. STATE		\$
c. PRIVATE PARTIES		\$
d. OTHER (specify):		\$

<b>POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION</b>		REGION <b>8</b>	SITE NUMBER <b>IL00001001</b>
NOTE: The initial identification of a potential site or incident should not be interpreted as a finding of illegal activity or confirmation that an actual health or environmental threat exists. All identified sites will be assessed under the EPA's Hazardous Waste Site Enforcement and Response System to determine if a hazardous waste problem actually exists.			
A. SITE NAME <b>Granite City Acetylene Plant</b>		B. STREET (or other identifier) <b>1525 Madison Avenue</b>	
C. CITY <b>Granite City</b>	D. STATE <b>Illinois</b>	E. ZIP CODE <b>62040</b>	F. COUNTY NAME 
G. OWNER/OPERATOR (if known) 1. NAME		2. TELEPHONE NUMBER	
H. TYPE OF OWNERSHIP (if known) <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			
I. SITE DESCRIPTION			
J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)			K. DATE IDENTIFIED (mo., day, & yr.)
L. SUMMARY OF POTENTIAL OR KNOWN PROBLEM			
M. PREPARER INFORMATION 1. NAME		2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)

5. St. Clair County Monsanto Chemical Company  
The known special waste and refuse disposal practices of this company for the past fifteen (15) years is as follows.  
Up to about five (5) years ago their special wastes were disposed of at the Sauget/Toxic site which they own and some wastes were shipped out of state. Their less noxious wastes went to the Sauget/Sauget site. During the time that the Wilsonville/Earthline site was in operation much of their special wastes went there. Presently, their special wastes are going to the Sheffield/Nuclear Engineering site and out of state to Rollins Environmental Services. No on-site disposal is presently occurring. Company has an incinerator, but it is no longer in use. They are presently looking into the feasibility of constructing and operating a sophisticated hazardous waste incinerator.
6. St. Clair County E. St. Louis/Swift Agricultural Chemicals  
See attached memo for a discussion of the operations of this company at their plant.
7. Madison County Granite City Air Products & Chemicals  
Even though the Eckhart Report stated that on site disposal was occurring, the company revealed that somehow the information as printed was wrong. One of the listings referred only to their general refuse which is placed in a dumpster and hauled to a permitted landfill. The other listing refers to the hydrated lime which is a by-product of their acetylene production plant. This hydrated lime is sold to Fox Industries of St. Louis, Missouri which stockpiles it at a couple of locations around Granite City and sells it as a raw product to various companies. It is not considered a special waste. Their waste oil is recycled through Gateway Petroleum Company in East St. Louis. 354
8. St. Clair County East St. Louis Allied Chemical Company  
This facility used to manufacture phosphoric acid up until about seven (7) years ago. The waste associated with this production was gypsum, which was landfilled over about ten (10) acres. The gypsum was sluiced out onto their property. It remains in place. At the present time Allied processes aluminum silicate rich earth to extricate the aluminum. The resultant silicate wastes are discharged into lagoons until they are full. This as well as all of the other pits, ponds, and lagoons identified in this report should be addressed in the S.I.A. Program.